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Bib Data Sheet

CONFIRMATION NO. 5639

<b>SERIAL NUMBER</b> 10/721,682	<b>FILING OR 371(c) DATE</b> 11/25/2003 <b>RULE</b>	<b>CLASS</b> 165	<b>GROUP ART UNIT</b> 3744	<b>ATTORNEY DOCKET NO.</b> 14-792C2D1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 10/234,807 09/04/2002 PAT 6,688,378 which is a CON of 09/799,268  
03/05/2001 ABN  
which is a CIP of 09/205,955 12/04/1998 ABN

YES TO  
NO TO

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 02/24/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>Thompson</i> Initials <i>TD</i>	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 76	<b>INDEPENDENT CLAIMS</b> 1
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**ADDRESS**

WATTS HOFFMANN CO., L.P.A.  
P.O. Box 99839  
Cleveland, OH 44199-0839

**TITLE**

Heat exchanger tube with integral restricting and turbulating structure

<b>FILING FEE RECEIVED</b> 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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